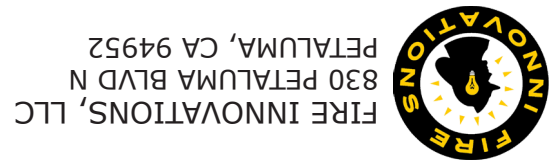




FIRE INNOVATIONS, LLC
WARRANTY DEPARTMENT
830 PETALUMA BLVD N
PETALUMA, CA 94952

PLACE
STAMP
HERE



RMA # _____
This number is issued by Fire Innovations

**Customer Warranty
& Feedback Card**

Contact Information

Department: _____

Name: _____

Address: _____

Phone: _____

Email: _____

Product Information

Product: _____

Model: _____

Serial No: _____

Purchase Information

Purchased: ☐ Online ☐ Dealer _____

Purchase date: _____

Date in-Service: _____

HOW WOULD YOU RATE:

Purchase experience?

☐ Excellent ☐ Ok ☐ Poor

Quality & workmanship of product?

☐ Excellent ☐ Ok ☐ Poor

Price to value ratio?

☐ Excellent ☐ Ok ☐ Poor

Product Performance?

☐ Excellent ☐ Ok ☐ Poor

Any additional feature or improvements you would like to suggest?
